

<b>United States Bankruptcy Court</b> <b>WESTERN District of NEW YORK</b>						<b>Voluntary Petition</b>																			
Name of Debtor (if individual, enter Last, First, Middle): <b>Thierfeldt, John N.</b>				Name of Joint Debtor (Spouse)(Last, First, Middle): <b>Thierfeldt, Isabelle N.</b>																					
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): <b>NONE</b>				All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names): <b>NONE</b>																					
Last four digits of Soc. Sec. No./Complete EIN or other Tax I.D. No. (if more than one, state all): <b>1782</b>				Last four digits of Soc. Sec. No./Complete EIN or other Tax I.D. No. (if more than one, state all): <b>8647</b>																					
Street Address of Debtor (No. & Street, City, and State): <b>1088 Wigren Road</b> <b>Frewsburg NY</b>				Street Address of Joint Debtor (No. & Street, City, and State): <b>1088 Wigren Road</b> <b>Frewsburg NY</b>																					
<div style="border: 1px solid black; float: right; width: 100px; text-align: center;">             ZIPCODE 14738           </div>				<div style="border: 1px solid black; float: right; width: 100px; text-align: center;">             ZIPCODE 14738           </div>																					
County of Residence or of the Principal Place of Business: <b>Chautauqua</b>				County of Residence or of the Principal Place of Business: <b>Chautauqua</b>																					
Mailing Address of Debtor (if different from street address): <b>SAME</b>				Mailing Address of Joint Debtor (if different from street address): <b>SAME</b>																					
<div style="border: 1px solid black; float: right; width: 100px; text-align: center;">             ZIPCODE           </div>				<div style="border: 1px solid black; float: right; width: 100px; text-align: center;">             ZIPCODE           </div>																					
Location of Principal Assets of Business Debtor (If different from street address above): <b>NOT APPLICABLE</b>						<div style="border: 1px solid black; float: right; width: 100px; text-align: center;">             ZIPCODE           </div>																			
<b>Type of Debtor</b> (Form of organization) (Check <b>one</b> box.) <input checked="" type="checkbox"/> Individual (includes Joint Debtors) <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (if debtor is not one of the above entities, check this box and provide the information requested below.)  <b>State type of entity:</b> _____		<b>Nature of Business</b> (Check <b>all</b> applicable boxes.) <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Nonprofit Organization qualified under 11 U.S.C. § 501(3)(c).		<b>Chapter or Section of Bankruptcy Code Under Which the Petition is Filed</b> (Check one box) <input checked="" type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding <input type="checkbox"/> Chapter 13																					
<b>Filing Fee</b> (Check one box) <input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Filing Fee to be paid in installments (Applicable to individuals only) Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official form No. 3A. <input type="checkbox"/> Filing fee waiver requested (Applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.		<b>Nature of Debts</b> (Check one box) <input checked="" type="checkbox"/> Consumer/Non-Business <input type="checkbox"/> Business		<b>Chapter 11 Debtors:</b> <b>Check one box:</b> <input type="checkbox"/> Debtor is a small business as defined in 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D).  <b>Check if:</b> <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts owed to non-insiders or affiliates are less than \$2 million.																					
<b>Statistical/Administrative Information</b> <input checked="" type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.						THIS SPACE IS FOR COURT USE ONLY																			
Estimated Number of Creditors		<table style="width: 100%; text-align: center;"> <tr> <td>1-49</td> <td>50-99</td> <td>100-199</td> <td>200-999</td> <td>1,000-5,000</td> <td>5,001-10,000</td> <td>10,001-25,000</td> <td>25,001-50,000</td> <td>50,001-100,000</td> <td>OVER 100,000</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>				1-49	50-99	100-199	200-999	1,000-5,000	5,001-10,000	10,001-25,000	25,001-50,000	50,001-100,000	OVER 100,000	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Estimated Assets		<table style="width: 100%; text-align: center;"> <tr> <td>\$0 to \$50,000</td> <td>\$50,001 to \$100,000</td> <td>\$100,001 to \$500,000</td> <td>\$500,001 to \$1 million</td> <td>\$1,000,001 to \$10 million</td> <td>\$10,000,001 to \$50 million</td> <td>\$50,000,001 to \$100 million</td> <td>More than \$100 million</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>				\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	More than \$100 million	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	More than \$100 million																		
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Estimated Debts		<table style="width: 100%; text-align: center;"> <tr> <td>\$0 to \$50,000</td> <td>\$50,001 to \$100,000</td> <td>\$100,001 to \$500,000</td> <td>\$500,001 to \$1 million</td> <td>\$1,000,001 to \$10 million</td> <td>\$10,000,001 to \$50 million</td> <td>\$50,000,001 to \$100 million</td> <td>More than \$100 million</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>				\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	More than \$100 million	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
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<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		

<b>Voluntary Petition</b> <i>(This page must be completed and filed in every case)</i>		Name of Debtor(s): <b>John N. Thierfeldt and Isabelle N. Thierfeldt</b>	
<b>Prior Bankruptcy Case Filed Within Last 8 Years</b> (If more than one, attach additional sheet)			
Location Where Filed: <b>NONE</b>		Case Number:	Date Filed:
<b>Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor</b> (If more than one, attach additional sheet)			
Name of Debtor: <b>NONE</b>		Case Number:	Date Filed:
District:		Relationship:	Judge:
<p style="text-align: center;"><b>Exhibit A</b></p> <p>(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under Chapter 11)</p> <p><input type="checkbox"/> Exhibit A is attached and made a part of this petition</p>		<p style="text-align: center;"><b>Exhibit B</b></p> <p>(To be completed if debtor is an individual whose debts are primarily consumer debts)</p> <p>I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter.</p> <p>I further certify that I delivered to the debtor the notice required by §342(b) of the Bankruptcy code.</p> <p><b>X</b> <u>/s/ Craig E. Jackson</u></p> <div style="display: flex; justify-content: space-between;"> <span>Signature of Attorney for Debtor(s)</span> <span>Date</span> </div>	
<p style="text-align: center;"><b>Exhibit C</b></p> <p>Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health and safety?</p> <p><input type="checkbox"/> Yes, and exhibit C is attached and made a part of this petition.</p> <p><input checked="" type="checkbox"/> No</p>		<p style="text-align: center;"><b>Certification Concerning Debt Counseling by Individual/Joint Debtor(s)</b></p> <p><input type="checkbox"/> I/we have received approved budget and credit counseling during the 180-day period preceding the filing of this petition.</p> <p><input type="checkbox"/> I/we request a waiver of the requirement to obtain budget and credit counseling prior to filing based on exigent circumstances. (Must attach certification describing)</p>	
<p style="text-align: center;"><b>Information Regarding the Debtor (Check the Applicable Boxes)</b></p> <p style="text-align: center;"><b>Venue</b> (Check any applicable box)</p> <p><input type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.</p> <p><input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.</p> <p><input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principle assets in the United States in this District, or has no principle place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interest of the parties will be served in regard to the relief sought in this District.</p>			
<p style="text-align: center;"><b>Statement by a Debtor Who Resides as a Tenant of Residential Property</b></p> <p style="text-align: center;"><i>Check all applicable boxes.</i></p> <p><input type="checkbox"/> Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)</p> <div style="margin-top: 10px;"> <p style="text-align: center;">_____</p> <p style="text-align: center;">(Name of landlord that obtained judgment)</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">(Address of landlord)</p> </div> <p><input type="checkbox"/> Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and</p> <p><input type="checkbox"/> Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.</p>			

<b>Voluntary Petition</b> <i>(This page must be completed and filed in every case)</i>	Name of Debtor(s): <b>John N. Thierfeldt and</b> <b>Isabelle N. Thierfeldt</b>
<b>Signatures</b>	
<p style="text-align: center;"><b>Signature(s) of Debtor(s) (Individual/Joint)</b></p> <p>I declare under penalty of perjury that the information provided in this petition is true and correct.          [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.</p> <p>[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by §342(b) of the Bankruptcy Code.</p> <p>I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p><b>X /s/ John N. Thierfeldt</b>          _____          Signature of Debtor</p> <p><b>X /s/ Isabelle N. Thierfeldt</b>          _____          Signature of Joint Debtor</p> <p>_____          Telephone Number (If not represented by attorney)</p> <p>_____          Date</p>	<p style="text-align: center;"><b>Signature of a Foreign Representative</b></p> <p>I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.</p> <p>(Check only one box.)</p> <p><input type="checkbox"/> I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documentation required by § 1515 of title 11 are attached.</p> <p><input type="checkbox"/> Pursuant to § 1511 of title 11, United States Code, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign proceeding is attached.</p> <p><b>X</b> _____          (Signature of Foreign Representative)</p> <p>_____          (Printed name of Foreign Representative)</p> <p>_____          (Date)</p>
<p style="text-align: center;"><b>Signature of Attorney</b></p> <p><b>X /s/ Craig E. Jackson</b>          _____          Signature of Attorney for Debtor(s)</p> <p><b>Craig E. Jackson</b>          _____          Printed Name of Attorney for Debtor(s)</p> <p><b>Burgett &amp; Robbins</b>          _____          Firm Name</p> <p><b>15 E. Fifth Street</b>          _____          Address</p> <p><b>P.O. Box 3090</b>          _____</p> <p><b>Jamestown NY 14702-3090</b>          _____</p> <p><b>716-488-3090</b>          _____          Telephone Number</p> <p>_____          Date</p>	<p style="text-align: center;"><b>Signature of Non-Attorney Bankruptcy Petition Preparer</b></p> <p>I declare under penalty of perjury that: 1) I am a bankruptcy petition preparer as defined in 11 U.S.C. §110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §110(b), 110(h), and 342(b); and, 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. §110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor as required in that section. Official Form 19B is attached.</p> <p>_____          Printed Name and title, if any, of bankruptcy Petition Preparer</p> <p>_____          Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principle, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)</p> <p>_____          Address</p> <p><b>X</b> _____          _____          _____          Date</p> <p>Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above.</p> <p>Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:</p> <p>_____          _____          _____</p> <p>If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.</p> <p><i>A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. § 110; Required by 18 U.S.C. § 156.</i></p>
<p style="text-align: center;"><b>Signature of Debtor (Corporation/Partnership)</b></p> <p>I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.</p> <p>The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p><b>X</b> _____          Signature of Authorized Individual</p> <p>_____          Printed Name of Authorized Individual</p> <p>_____          Title of Authorized Individual</p> <p>_____          Date</p>	

In re John N. and Isabelle N. Thierfeldt

Debtor(s)

Case number: \_\_\_\_\_

(If known)

According to the calculations required by this statement:

☐ The presumption arises.☒ The presumption does not arise.

(Check the box as directed in Parts I, III, and VI of this statement.)

## STATEMENT OF CURRENT MONTHLY INCOME AND MEANS TEST CALCULATION FOR USE IN CHAPTER 7

In addition to Schedule I and J, this statement must be completed by every individual Chapter 7 debtor, whether or not filing jointly, whose debts are primarily consumer debts. Joint debtors may complete one statement only.

### Part I. EXCLUSION FOR DISABLED VETERANS

1

If you are a disabled veteran described in the Veteran's Declaration in this Part I, (1) check the box at the beginning of the Veteran's Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.

☐ **Veteran's Declaration.** By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. § 901(1)).

### Part II. CALCULATION OF MONTHLY INCOME FOR § 707(b)(7) EXCLUSION

2

**Marital/filing status.** Check the box that applies and complete the balance of this part of this statement as directed.

a. ☐ Unmarried. **Complete only Column A ("Debtor's Income") for Lines 3-11.**

b. ☐ Married, not filing jointly, with declaration of separate households. By checking this box, debtor declares under penalty of perjury: "My spouse and I are legally separated under applicable non-bankruptcy law or my spouse and I are living apart other than for the purpose of evading the requirements of § 707(b)(2)(A) of the Bankruptcy Code." **Complete only Column A ("Debtor's Income") for Lines 3-11.**

c. ☐ Married, not filing jointly, without the declaration of separate households set out in Line 2.b above. **Complete both Column A ("Debtor's Income") and Column B (Spouse's Income) for Lines 3-11.**

d. ☒ Married, filing jointly. **Complete both Column A ("Debtor's Income") and Column B (Spouse's Income) for Lines 3-11.**

All figures must reflect average monthly income for the six calendar months prior to filing the bankruptcy case, ending on the last day of the month before the filing. If you received different amounts of income during these six months, you must total the amounts received during the six months, divide this total by six, and enter the result on the appropriate line.

Column A	Column B
Debtor's Income	Spouse's Income

3

Gross wages, salary, tips, bonuses, overtime, commissions.

\$0.00

\$1,072.28

4

Income from the operation of a business, profession, or farm. Subtract Line b from Line a and enter the difference on Line 4. Do not enter a number less than zero. **Do not include any part of the business expenses entered on Line b as a deduction in Part V.**

a.	Gross receipts	\$0.00
b.	Ordinary and necessary business expenses	\$0.00
c.	Business income	Subtract Line b from Line a

\$0.00

\$0.00

5

Rent and other real property income. Subtract Line b from Line a and enter the difference on Line 5. Do not enter a number less than zero. **Do not include any part of the operating expenses entered on Line b as a deduction in Part V.**

a.	Gross receipts	\$0.00
b.	Ordinary and necessary operating expenses	\$0.00
c.	Rental income	Subtract Line b from Line a

\$0.00

\$0.00

6

Interest, dividends, and royalties.

\$0.00

\$0.00

7

Pension and retirement income.

\$399.10

\$124.93

8	Regular contributions to the household expenses of the debtor or the debtor's dependents, including child or spousal support. Do not include contributions from the debtor's spouse if Column B is completed.	\$0.00	\$0.00												
9	<p>Unemployment compensation. Enter the amount in Column A and, if applicable, Column B. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below:</p> <table border="1"> <tr> <td>Unemployment compensation claimed to be a benefit under the Social Security Act</td> <td>Debtor <u>\$0.00</u></td> <td>Spouse <u>\$0.00</u></td> </tr> </table>	Unemployment compensation claimed to be a benefit under the Social Security Act	Debtor <u>\$0.00</u>	Spouse <u>\$0.00</u>	\$0.00	\$0.00									
Unemployment compensation claimed to be a benefit under the Social Security Act	Debtor <u>\$0.00</u>	Spouse <u>\$0.00</u>													
10	<p>Income from all other sources. If necessary, list additional sources on a separate page. <b>Do not include</b> any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism. Specify source and amount.</p> <table border="1"> <tr> <td>a.</td> <td></td> <td>\$0.00</td> </tr> <tr> <td>b.</td> <td></td> <td>\$0.00</td> </tr> <tr> <td>c.</td> <td></td> <td>\$0.00</td> </tr> <tr> <td>d.</td> <td></td> <td>\$0.00</td> </tr> </table> <p>Total and enter on Line 10</p>	a.		\$0.00	b.		\$0.00	c.		\$0.00	d.		\$0.00	\$0.00	\$0.00
a.		\$0.00													
b.		\$0.00													
c.		\$0.00													
d.		\$0.00													
11	<b>Subtotal of Current Monthly Income for § 707(b)(7).</b> Add Lines 3 thru 10 in Column A, and, if Column B is completed, add Lines 3 through 10 in Column B. Enter the total(s).	\$399.10	\$1,197.21												
12	<b>Total Current Monthly Income for § 707(b)(7).</b> If Column B has been completed, add Line 11, Column A to Line 11, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 11, Column A.	\$1,596.31													

### Part III. APPLICATION OF § 707(b)(7) EXCLUSION

13	<b>Annualized Current Monthly Income for § 707(b)(7).</b> Multiply the amount from Line 12 by the number 12 and enter the result.	\$19,155.72
14	<p><b>Applicable median family income.</b> Enter the median family income for the applicable state and household size. (This information is available by family size at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)</p> <p>a. Enter debtor's state of residence: <u>NEW YORK</u> b. Enter debtor's household size: <u>2</u></p>	\$48,492.00
15	<p><b>Application of Section 707(b)(7).</b> Check the applicable box and proceed as directed.</p> <p><input checked="" type="checkbox"/> <b>The amount on Line 13 is less than or equal to the amount on Line 14.</b> Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete Part VIII; do not complete Parts IV, V, VI, or VII.</p> <p><input type="checkbox"/> <b>The amount on Line 13 is more than the amount on Line 14.</b> Complete the remaining parts of this statement.</p>	

Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15).

### Part IV. CALCULATION OF CURRENT MONTHLY INCOME FOR § 707(b)(2)

16	<b>Enter the amount from Line 12.</b>	\$0.00
17	<b>Marital adjustment.</b> If you checked the box at Line 2.c, enter the amount of the income listed in Line 11, Column B that was NOT regularly contributed to the household expenses of the debtor or the debtor's dependents. If you did not check box at Line 2.c, enter zero.	\$0.00
18	<b>Current monthly income for § 707(b)(2).</b> Subtract Line 17 from Line 16 and enter the result.	\$0.00

### Part V. CALCULATION OF DEDUCTIONS ALLOWED UNDER § 707(b)(2)

#### Subpart A: Deductions under Standards of the Internal Revenue Service (IRS)

19	<p><b>National Standards: food, clothing, household supplies, personal care, and miscellaneous.</b> Enter "Total" amount from IRS National Standards for Allowable Living Expenses for the applicable family size and income level. (This information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)</p>	\$0.00
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20A	<b>Local Standards: housing and utilities; non-mortgage expenses.</b> Enter the amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and family size. (This information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court).		\$0.00									
20B	<b>Local Standards: housing and utilities; mortgage/rent expenses.</b> Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and family size (this information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 42; subtract Line b from Line a and enter the result in Line 20B. <b>Do not enter an amount less than zero.</b> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <tr> <td style="width: 5%; text-align: center;">a.</td> <td style="width: 65%;">IRS Housing and Utilities Standards; mortgage/rental expenses</td> <td style="width: 30%; text-align: right;">\$0.00</td> </tr> <tr> <td style="text-align: center;">b.</td> <td>Average Monthly Payment for any debts secured by your home, if any, as stated in Line 42</td> <td style="text-align: right;">\$0.00</td> </tr> <tr> <td style="text-align: center;">c.</td> <td>Net mortgage/rental expense</td> <td style="text-align: right;">Subtract Line b from Line a.</td> </tr> </table>		a.	IRS Housing and Utilities Standards; mortgage/rental expenses	\$0.00	b.	Average Monthly Payment for any debts secured by your home, if any, as stated in Line 42	\$0.00	c.	Net mortgage/rental expense	Subtract Line b from Line a.	\$0.00
a.	IRS Housing and Utilities Standards; mortgage/rental expenses	\$0.00										
b.	Average Monthly Payment for any debts secured by your home, if any, as stated in Line 42	\$0.00										
c.	Net mortgage/rental expense	Subtract Line b from Line a.										
21	<b>Local Standards: housing and utilities; adjustment.</b> If you contend that the process set out in Lines 20A and 20B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below: <div style="border: 1px solid black; height: 50px; margin-top: 5px;"></div>		\$0.00									
22	<b>Local Standards: transportation; vehicle operation/public transportation expense.</b> You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation.  Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 8. <input checked="" type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 or more.  Enter the amount from IRS Transportation Standards, Operating Costs & Public Transportation Costs for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (This information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)		\$0.00									
23	<b>Local Standards: transportation ownership/lease expense; Vehicle 1.</b> Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.) <input type="checkbox"/> 1 <input type="checkbox"/> 2 or more.  Enter, in Line a below, the amount of the IRS Transportation Standards, Ownership Costs, First Car (available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 42; subtract Line b from Line a and enter the result in Line 23. <b>Do not enter an amount less than zero.</b> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <tr> <td style="width: 5%; text-align: center;">a.</td> <td style="width: 65%;">IRS Transportation Standards, Ownership Costs, First Car</td> <td style="width: 30%; text-align: right;">\$0.00</td> </tr> <tr> <td style="text-align: center;">b.</td> <td>Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42</td> <td style="text-align: right;">\$0.00</td> </tr> <tr> <td style="text-align: center;">c.</td> <td>Net ownership/lease expense for Vehicle 1</td> <td style="text-align: right;">Subtract Line b from Line a.</td> </tr> </table>		a.	IRS Transportation Standards, Ownership Costs, First Car	\$0.00	b.	Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42	\$0.00	c.	Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a.	\$0.00
a.	IRS Transportation Standards, Ownership Costs, First Car	\$0.00										
b.	Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42	\$0.00										
c.	Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a.										
24	<b>Local Standards: transportation ownership/lease expense; Vehicle 2.</b> Complete this Line only if you checked the "2 or more" Box in Line 23. Enter, in Line a below, the amount of the IRS Transportation Standards, Ownership Costs, Second Car (available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 42; subtract Line b from Line a and enter the result in Line 24. <b>Do not enter an amount less than zero.</b> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <tr> <td style="width: 5%; text-align: center;">a.</td> <td style="width: 65%;">IRS Transportation Standards, Ownership Costs, Second Car</td> <td style="width: 30%; text-align: right;">\$0.00</td> </tr> <tr> <td style="text-align: center;">b.</td> <td>Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42</td> <td style="text-align: right;">\$0.00</td> </tr> <tr> <td style="text-align: center;">c.</td> <td>Net ownership/lease expense for Vehicle 2</td> <td style="text-align: right;">Subtract Line b from Line a.</td> </tr> </table>		a.	IRS Transportation Standards, Ownership Costs, Second Car	\$0.00	b.	Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42	\$0.00	c.	Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a.	\$0.00
a.	IRS Transportation Standards, Ownership Costs, Second Car	\$0.00										
b.	Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42	\$0.00										
c.	Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a.										
25	<b>Other Necessary Expenses: taxes.</b> Enter the total average monthly expense that you actually incur for all federal, state and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. <b>Do not include real estate or sales taxes.</b>		\$0.00									

26	<b>Other Necessary Expenses: mandatory payroll deductions.</b> Enter the total average monthly payroll deductions that are required for your employment, such as mandatory retirement contributions, union dues, and uniform costs. <b>Do not include discretionary amounts, such as non-mandatory 401(k) contributions.</b>	\$0.00
27	<b>Other Necessary Expenses: life insurance.</b> Enter average monthly premiums that you actually pay for term life insurance for yourself. <b>Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.</b>	\$0.00
28	<b>Other Necessary Expenses: court-ordered payments.</b> Enter the total monthly amount that you are required to pay pursuant to court order, such as spousal or child support payments. <b>Do not include payments on past due support obligations included in Line 44.</b>	\$0.00
29	<b>Other Necessary Expenses: education for employment or for a physically or mentally challenged child.</b> Enter the total monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.	\$0.00
30	<b>Other Necessary Expenses: childcare.</b> Enter the average monthly amount that you actually expend on childcare. <b>Do not include payments made for children's education.</b>	\$0.00
31	<b>Other Necessary Expenses: health care.</b> Enter the average monthly amount that you actually expend on health care expenses that are not reimbursed by insurance or paid by a health savings account. <b>Do not include payments for health insurance listed in Line 34.</b>	\$0.00
32	<b>Other Necessary Expenses: telecommunication services.</b> Enter the average monthly expenses that you actually pay for cell phones, pagers, call waiting, caller identification, special long distance, or internet services necessary for the health and welfare of you or your dependents. <b>Do not include any amount previously deducted.</b>	\$0.00
33	<b>Total Expenses Allowed under IRS Standards.</b> Enter the total of Lines 19 through 32	\$0.00

**Subpart B: Additional Expense Deductions under § 707(b)**  
**Note: Do not include any expenses that you have listed in Lines 19-32**

34	<b>Health Insurance, Disability Insurance and Health Savings Account Expenses.</b> List the average monthly amounts that you actually expend in each of the following categories and enter the total.		\$0.00	
	a.	Health Insurance		\$0.00
	b.	Disability Insurance		\$0.00
	c.	Health Savings Account		\$0.00
				Total: Add Lines a, b and c
35	<b>Continued contributions to the care of household or family members.</b> Enter the actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses.		\$0.00	
36	<b>Protection against family violence.</b> Enter any average monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law.		\$0.00	
37	<b>Home energy costs in excess of the allowance specified by the IRS Local Standards.</b> Enter the average monthly amount by which your home energy costs exceed the allowance in the IRS Local Standards for Housing and Utilities. <b>You must provide your case trustee with documentation demonstrating that the additional amount claimed is reasonable and necessary.</b>		\$0.00	
38	<b>Education expenses for dependent children less than 18.</b> Enter the average monthly expenses that you actually incur, not to exceed \$125 per child, in providing elementary and secondary education for your dependent children less than 18 years of age. <b>You must provide your case trustee with documentation demonstrating that the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards.</b>		\$0.00	
39	<b>Additional food and clothing expense.</b> Enter the average monthly amount by which your food and clothing expenses exceed the combined allowances for food and apparel in the IRS National Standards, not to exceed five percent of those combined allowances. (This information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) <b>You must provide your case trustee with documentation demonstrating that the additional amount claimed is reasonable and necessary.</b>		\$0.00	
40	<b>Continued charitable contributions.</b> Enter the amount that you will continue to contribute in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2).		\$0.00	

41	<b>Total Additional Expense Deductions under § 707(b).</b> Enter the total of Lines 34 through 40	\$0.00																												
<b>Subpart C: Deductions for Debt Payment</b>																														
42	<p><b>Future payments on secured claims.</b> For each of your debts that is secured by an interest in property that you own, list the name of creditor, identify the property securing the debt, and state the Average Monthly Payment. The Average Monthly Payment is the total of all amounts contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. Mortgage debts should include payments of taxes and insurance required by the mortgage. If necessary, list additional entries on a separate page.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 5%;"></th> <th style="width: 25%;">Name of Creditor</th> <th style="width: 35%;">Property Securing the Debt</th> <th style="width: 35%;">60-Month average Payment</th> </tr> </thead> <tbody> <tr><td>a.</td><td></td><td></td><td>\$0.00</td></tr> <tr><td>b.</td><td></td><td></td><td>\$0.00</td></tr> <tr><td>c.</td><td></td><td></td><td>\$0.00</td></tr> <tr><td>d.</td><td></td><td></td><td>\$0.00</td></tr> <tr><td>e.</td><td></td><td></td><td>\$0.00</td></tr> <tr> <td colspan="3"></td> <td style="text-align: right;">Total: Add Lines a - e</td> </tr> </tbody> </table>		Name of Creditor	Property Securing the Debt	60-Month average Payment	a.			\$0.00	b.			\$0.00	c.			\$0.00	d.			\$0.00	e.			\$0.00				Total: Add Lines a - e	\$0.00
	Name of Creditor	Property Securing the Debt	60-Month average Payment																											
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d.			\$0.00																											
e.			\$0.00																											
			Total: Add Lines a - e																											
43	<p><b>Past due payments on secured claims.</b> If any of the debts listed in Line 42 are in default, and the property securing the debt is necessary for your support or the support of your dependents, you may include in your deductions 1/60th of the amount that you must pay the creditor as a result of the default (the "cure amount") in order to maintain possession of the property. List any such amounts in the following chart and enter the total. If necessary, list additional entries on a separate page.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 5%;"></th> <th style="width: 25%;">Name of Creditor</th> <th style="width: 35%;">Property Securing the Debt in Default</th> <th style="width: 35%;">1/60th of the Cure Amount</th> </tr> </thead> <tbody> <tr><td>a.</td><td></td><td></td><td>\$0.00</td></tr> <tr><td>b.</td><td></td><td></td><td>\$0.00</td></tr> <tr><td>c.</td><td></td><td></td><td>\$0.00</td></tr> <tr><td>d.</td><td></td><td></td><td>\$0.00</td></tr> <tr><td>e.</td><td></td><td></td><td>\$0.00</td></tr> <tr> <td colspan="3"></td> <td style="text-align: right;">Total: Add Lines a - e</td> </tr> </tbody> </table>		Name of Creditor	Property Securing the Debt in Default	1/60th of the Cure Amount	a.			\$0.00	b.			\$0.00	c.			\$0.00	d.			\$0.00	e.			\$0.00				Total: Add Lines a - e	\$0.00
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d.			\$0.00																											
e.			\$0.00																											
			Total: Add Lines a - e																											
44	<b>Payments on priority claims.</b> Enter the total amount of all priority claims (including priority child support and alimony claims), divided by 60.	\$0.00																												
45	<p><b>Chapter 13 administrative expenses.</b> If you are eligible to file a case under Chapter 13, complete the following chart, multiply the amount in line a by the amount in line b, and enter the resulting administrative expense.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tbody> <tr> <td style="width: 5%; text-align: center;">a.</td> <td style="width: 55%;">Projected average monthly Chapter 13 plan payment.</td> <td style="width: 40%; text-align: right;">\$0.00</td> </tr> <tr> <td style="text-align: center;">b.</td> <td>Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)</td> <td style="text-align: right;">x 0</td> </tr> <tr> <td style="text-align: center;">c.</td> <td>Average monthly administrative expense of Chapter 13 case</td> <td style="text-align: right;">Total: Multiply Lines a and b</td> </tr> </tbody> </table>	a.	Projected average monthly Chapter 13 plan payment.	\$0.00	b.	Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)	x 0	c.	Average monthly administrative expense of Chapter 13 case	Total: Multiply Lines a and b	\$0.00																			
a.	Projected average monthly Chapter 13 plan payment.	\$0.00																												
b.	Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at <a href="http://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)	x 0																												
c.	Average monthly administrative expense of Chapter 13 case	Total: Multiply Lines a and b																												
46	<b>Total Deductions for Debt Payment.</b> Enter the total of Lines 42 through 45.	\$0.00																												
<b>Subpart D: Total Deductions Allowed under § 707(b)(2)</b>																														
47	<b>Total of all deductions allowed under § 707(b)(2).</b> Enter the total of Lines 33, 41, and 46.	\$0.00																												

**Part VI. DETERMINATION OF § 707(b)(2) PRESUMPTION**

48	<b>Enter the amount from Line 18 (Current monthly income for § 707(b)(2))</b>	\$0.00
49	<b>Enter the amount from Line 47 (Total of all deductions allowed under § 707(b)(2))</b>	\$0.00
50	<b>Monthly disposable income under § 707(b)(2).</b> Subtract Line 49 from Line 48 and enter the result	\$0.00



51	<b>60-month disposable income under § 707(b)(2).</b> Multiply the amount in Line 50 by the number 60 and enter the result.	\$0.00
52	<b>Initial presumption determination.</b> Check the applicable box and proceed as directed. <input type="checkbox"/> <b>The amount on Line 51 is less than \$6,000</b> Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII. Do not complete the remainder of Part VI. <input type="checkbox"/> <b>The amount set forth on Line 51 is more than \$10,000.</b> Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. Do not complete the remainder of Part VI. <input type="checkbox"/> <b>The amount on Line 51 is at least \$6,000, but not more than \$10,000.</b> Complete the remainder of Part VI (Lines 53 through 55).	
53	<b>Enter the amount of your total non-priority unsecured debt</b>	\$0.00
54	<b>Threshold debt payment amount.</b> Multiply the amount in Line 53 by the number 0.25 and enter the result.	\$0.00
55	<b>Secondary presumption determination.</b> Check the applicable box and proceed as directed. <input type="checkbox"/> <b>The amount on Line 51 is less than the amount on Line 54.</b> Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII. <input type="checkbox"/> <b>The amount on Line 51 is equal to or greater than the amount on Line 54.</b> Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII.	

**PART VII. ADDITIONAL EXPENSE CLAIMS**

56	<b>Other Expenses.</b> List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare of you and your family and that you contend should be an additional deduction from your current monthly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average monthly expense for each item. Total the expenses.	
	Expense Description	Monthly Amount
	a.	\$0.00
	b.	\$0.00
	c.	\$0.00
	Total: Add Lines a, b, and c	\$0.00

**Part VIII: VERIFICATION**

57	I declare under penalty of perjury that the information provided in this statement is true and correct. <i>(If this a joint case, both debtors must sign.)</i>	
	Date: _____ Signature: <u>/s/ John N. Thierfeldt</u> (Debtor)	
	Date: _____ Signature: <u>/s/ Isabelle N. Thierfeldt</u> (Joint Debtor, if any )	

# UNITED STATES BANKRUPTCY COURT WESTERN DISTRICT OF NEW YORK

In re: **John N. Thierfeldt**  
**and**  
**Isabelle N. Thierfeldt**

Case No.

## STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. Do not include the name or address of a minor child in this statement. Indicate payments, transfers and the like to minor children by stating "a minor child." See 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1-18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19-25. If the answer to an applicable question is "None," or the question is not applicable, mark the box labeled "None." If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

### DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within the six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor may also be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporation debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. §101.

#### 1. Income from employment or operation of business

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the two years immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### AMOUNT

#### SOURCE

**Year to date:** \$2,749.02**Combined monthly income****Last Year:** \$20,912.00**2004 Joint Income taxes****Year before:** \$26,403.00**2003 Joint Income taxes**

#### 2. Income other than from employment or operation of business

State the amount of income received by the debtor other than from employment, trade, profession, operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

☒ NONE

**3. Payments to creditors**

Complete a. or b., as appropriate, and c.

a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor, made within 90 days immediately preceding the commencement of this case if the aggregate value of all property that constitutes or is affected by such transfer is not less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

☒ NONE

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case if the aggregate value of all property that constitutes or is affected by such transfer is not less than \$5,000. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

☒ NONE

c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and joint petition is not filed.)

☒ NONE**4. Suits and administrative proceedings, executions, garnishments and attachments**

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER	NATURE OF PROCEEDING	COURT OR AGENCY AND LOCATION	STATUS OR DISPOSITION
<i>Citibank South Dakota v. John N. Thierfeldt</i>  <i>1425/05</i>	<i>Garnishment of Wages through Keybank</i>	<i>Supreme Court of NY County of Chautauqua</i>	<i>Pending</i>

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED	DATE OF SEIZURE	DESCRIPTION AND VALUE OF PROPERTY
<i>Name: Citibank South Dakota Address: 7920 NW 110th st. Kansas City, MO 64153</i>	<i>2/02/2006</i>	<i>Description: Wages (checking acct w/ Keybank) Value: \$4,956.72</i>

**5. Repossessions, foreclosures and returns**

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

☒ NONE

## 6. Assignments and receiverships

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case.(Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

☒ NONE

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case.(Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

☒ NONE

## 7. Gifts

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient.(Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

☒ NONE

## 8. Losses

List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

☒ NONE

## 9. Payments related to debt counseling or bankruptcy

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
<i>Payee: Craig E. Jackson</i>	<i>Date of Payment: 1/28/2006</i>	<i>\$274.00</i>
<i>Address:</i>	<i>Payor: John N. Thierfeldt</i>	
<i>15 E. Fifth Street</i>		
<i>P.O. Box 3090</i>		
<i>Jamestown, NY 14702-3090</i>		

## 10. Other transfers

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

☒ NONE

b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

☒ NONE

### 11. Closed financial accounts

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

☒ NONE

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### 12. Safe deposit boxes

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

☒ NONE

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### 13. Setoffs

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

☒ NONE

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### 14. Property held for another person

List all property owned by another person that the debtor holds or controls.

☒ NONE

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### 15. Prior address of debtor

If the debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

☒ NONE

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### 16. Spouses and Former Spouses

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

☒ NONE

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### 17. Environmental Information

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to disposal sites.

"Hazardous Material" means anything defined as hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law:

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

☒ NONE

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

☒ NONE

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c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law, with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

☒ NONE

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**18. Nature, location and name of business**

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

☒ NONE

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b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

☒ NONE

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*[If completed by an individual or individual and spouse]*

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date \_\_\_\_\_

Signature /s/ John N. Thierfeldt

Date \_\_\_\_\_

/s/ Isabelle N. Thierfeldt

of Joint Debtor  
(if any)

In re John N. Thierfeldt and Isabelle N. Thierfeldt / DebtorCase No. \_\_\_\_\_  
(if known)**SCHEDULE A-REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, or both own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G-Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C-Property Claimed as Exempt.

Description and Location of Property	Nature of Debtor's Interest in Property	Husband--H Wife--W Joint--J Community--C	Current Value of Debtor's Interest, in Property Without Deducting any Secured Claim or Exemption	Amount of Secured Claim
<i>Kitty Hawk, North Carolina Timeshare</i>	<i>Co-tenancy</i>	<i>J</i>	<i>\$ 8,000.00</i>	<i>\$ 3,000.00</i>
<i>Ocean Key Resort, Virginia Timeshare</i>	<i>Co-tenancy</i>	<i>J</i>	<i>\$ 9,000.00</i>	<i>\$ 9,000.00</i>
<i>Ocean Sands Resort, Virginia Timeshare</i>	<i>Co-tenancy</i>	<i>J</i>	<i>\$ 9,000.00</i>	<i>\$ 0.00</i>
<i>1088 Wigren Road, Frewsburg NY 14738</i>	<i>Fee Simple</i>	<i>J</i>	<i>\$ 100,000.00</i>	<i>\$ 95,305.58</i>
<b>TOTAL \$</b>			<b>126,000.00</b>	

No continuation sheets attached

(Report also on Summary of Schedules.)



In re John N. Thierfeldt and Isabelle N. Thierfeldt / DebtorCase No. \_\_\_\_\_  
(if known)**SCHEDULE B-PERSONAL PROPERTY**

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "X" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, or both own property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C-Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G-Executory Contracts and Unexpired Leases. If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property."

Type of Property	None	Description and Location of Property	Husband--H Wife--W Joint--J Community--C	Current Value of Debtor's Interest, in Property Without Deducting any Secured Claim or Exemption
1. Cash on hand.	X			
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		<p><i>Checking account with M&amp;T Bank</i> <i>Location: In debtor's possession</i></p> <p><i>Checking account with Keybank</i> <i>Location: In debtor's possession</i></p>	<p>J</p> <p>J</p>	<p>\$ 100.00</p> <p>Unknown</p>
3. Security deposits with public utilities, telephone companies, landlords, and others.	X			
4. Household goods and furnishings, including audio, video, and computer equipment.		<p><i>Household goods and furnishings</i> <i>Location: In debtor's possession</i></p>	J	\$ 5,000.00
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6. Wearing apparel.		<p><i>Clothing</i> <i>Location: In debtor's possession</i></p>	J	\$ 350.00
7. Furs and jewelry.	X			
8. Firearms and sports, photographic, and other hobby equipment.	X			
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
10. Annuities. Itemize and name each issuer.	X			
11. Interest in an education IRA as defined in 26 U.S.C. 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. 521(c); Rule 1007(b)).	X			

In re John N. Thierfeldt and Isabelle N. Thierfeldt / DebtorCase No. \_\_\_\_\_  
(if known)**SCHEDULE B-PERSONAL PROPERTY**

(Continuation Sheet)

Type of Property	None	Description and Location of Property	Husband--H Wife--W Joint--J Community--C	Current Value of Debtor's Interest, in Property Without Deducting any Secured Claim or Exemption
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Itemize.	X			
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14. Interests in partnerships or joint ventures. Itemize.	X			
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	X			
16. Accounts Receivable.	X			
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18. Other liquidated debts owing debtor including tax refunds. Give particulars.	X			
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule of Real Property.	X			
20. Contingent and non-contingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information (as described in 11 U.S.C. 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25. Automobiles, trucks, trailers and other vehicles.		94 Buick Road Master Location: In debtor's possession	J	\$ 2,700.00
		96 GMC Sierra pickup Location: In debtor's possession	J	\$ 4,500.00

In re John N. Thierfeldt and Isabelle N. Thierfeldt / DebtorCase No. \_\_\_\_\_  
(if known)**SCHEDULE B-PERSONAL PROPERTY**

(Continuation Sheet)

Type of Property	None	Description and Location of Property		Current Value of Debtor's Interest, in Property Without Deducting any Secured Claim or Exemption
			Husband--H Wife--W Joint--J Community--C	
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.	X			
29. Machinery, fixtures, equipment and supplies used in business.	X			
30. Inventory.	X			
31. Animals.	X			
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.	X			
<b>Total ➡</b>				<b>\$ 12,650.00</b>

In re John N. Thierfeldt and Isabelle N. Thierfeldt / DebtorCase No. \_\_\_\_\_  
(if known)**SCHEDULE C-PROPERTY CLAIMED AS EXEMPT**

Debtor claims the exemptions to which debtor is entitled under:

☐ Check if debtor claims a homestead exemption that exceeds \$125,000.

(Check one box)

☐ 11 U.S.C. § 522(b) (2):☒ 11 U.S.C. § 522(b) (3):

Description of Property	Specify Law Providing each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemptions
1088 Wigren Road, Frewsburg NY 14738	N.Y. Civ. Prac. Law and Rules §5206(a)	\$ 4,694.42	\$ 100,000.00
Checking account	N.Y. Banking Law §407	\$ 100.00	\$ 100.00
Checking account	N.Y. Banking Law §407	\$ 0.00	Unknown
Household goods and furnishings	N.Y. Civ. Prac. Law and Rules §5205(a) (5)	\$ 5,000.00	\$ 5,000.00
Clothing	N.Y. Civ. Prac. Law and Rules §5205(a)	\$ 350.00	\$ 350.00
94 Buick Road Master	N.Y. Debtor and Creditor Law §282(1)	\$ 2,700.00	\$ 2,700.00
96 GMC Sierra pickup	N.Y. Debtor and Creditor Law §282(1)	\$ 2,100.00	\$ 4,500.00

In re John N. Thierfeldt and Isabelle N. Thierfeldt / DebtorCase No. \_\_\_\_\_  
(if known)**SCHEDULE D-CREDITORS HOLDING SECURED CLAIMS**

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. 112; Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column marked "Codebtor," include the entity on the appropriate schedule of creditors and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Creditor's Name and Mailing Address Including Zip Code	C o d e b t o r	Date Claim was Incurred, Nature of Lien, and Description and Market Value of Property Subject to Lien	C o n t i n g e n t	U n l i q u i d a t e d	D i s p u t e d	Amount of Claim Without Deducting Value of Collateral	Unsecured Portion, if any
Account No: <b>4-22</b> <b>Creditor # : 1</b> <b>Barrier Island Station</b> <b>1 Cypress Knee Trail</b> <b>Kitty Hawk NC 27949</b>		<b>J 2005</b> <b>Timeshare</b>  Value: <b>\$ 8,000.00</b>				<b>\$ 3,000.00</b>	<b>\$ 0.00</b>
Account No: <b>74-6</b> <b>Creditor # : 2</b> <b>Household Finance Realty</b> <b>270 East Fairmount Ave.</b> <b>Lakewood NY 14750</b>		<b>J 2000</b> <b>Second mortgage</b>  Value: <b>\$ 100,000.00</b>				<b>\$ 56,055.58</b>	<b>\$ 0.00</b>
Account No: <b>9889</b> <b>Creditor # : 3</b> <b>National City Bank</b> <b>1650 Market Street Ext.</b> <b>Warren PA 16365</b>		<b>J 1999</b> <b>Mortgage</b>  Value: <b>\$ 100,000.00</b>				<b>\$ 39,250.00</b>	<b>\$ 0.00</b>
Account No: <b>0242</b> <b>Creditor # : 4</b> <b>Ocean Sands Resort</b> <b>580 Lynnhaven Parkway</b> <b>ste #201</b> <b>Virginia Beach VA 23452</b>		<b>J 2005</b> <b>Timeshare</b>  Value: <b>\$ 9,000.00</b>				<b>Unknown</b>	<b>\$ 0.00</b>

1 continuation sheets attached

<b>Subtotal \$</b> (Total of this page)	<b>98,305.58</b>
<b>Total \$</b> (Use only on last page)	

In re John N. Thierfeldt and Isabelle N. Thierfeldt / DebtorCase No. \_\_\_\_\_  
(if known)**SCHEDULE D-CREDITORS HOLDING SECURED CLAIMS**

(Continuation Sheet)

Creditor's Name and Mailing Address Including Zip Code	C o d e b t o r	Date Claim was Incurred, Nature of Lien, and Description and Market Value of Property Subject to Lien  H--Husband W--Wife J--Joint C--Community	C o n t i n g e n t	U n l i q u i d a t e d	D i s p u t e d	Amount of Claim Without Deducting Value of Collateral	Unsecured Portion, if any
Account No: <u>21-0</u>  <b>Creditor # : 5</b> <b>Vacation Sales Associates, LP</b> <b>PO Box 9817</b> <b>Virginia Beach VA 23450</b>		<b>J 2005</b> <b>Timeshare</b>  Value: \$ <u>9,000.00</u>				\$ <u>10,000.00</u>	\$ <u>1,000.00</u>
Account No:		Value:					
Account No:		Value:					
Account No:		Value:					
Account No:		Value:					
Account No:		Value:					

Sheet No. 1 of 1 continuation sheets attached to Schedule of Creditors

Holding Secured Claims

<b>Subtotal \$</b> (Total of this page)	<u>10,000.00</u>
<b>Total \$</b> (Use only on last page)	<u>108,305.58</u>

In re John N. Thierfeldt and Isabelle N. Thierfeldt / Debtor

Case No. \_\_\_\_\_

(if known)

**SCHEDULE E-CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed.R.Bankr.P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether husband, wife, both of them or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotal" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotal" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. If applicable, also report this total on the Means Test form.

☒ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

**TYPES OF PRIORITY CLAIMS** (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)☐ **Domestic Support Obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

☐ **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

☐ **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,000\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

☐ **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$4,925\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

☐ **Deposits by individuals**

Claims of individuals up to \$2,225\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

☐ **Taxes and Certain Other Debts Owed to Governmental Units**

Taxes, custom duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ **Commitments to Maintain the Capital of an Insured Depository Institution**

Claims based on commitments to FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

☐ **Claims for Death or Personal Injury While Debtor Was Intoxicated**

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

\*Amounts are subject to adjustment on April 1, 2007, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

**No continuation sheets attached**

In re John N. Thierfeldt and Isabelle N. Thierfeldt / Debtor

Case No. \_\_\_\_\_

(if known)

**SCHEDULE F-CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. 112; Fed.R.Bankr.P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedules. Report this total also on the

☐ Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

Creditor's Name and Mailing Address including Zip Code And Account Number (See instructions above.)	C o d e b t o r	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	C o n t i n g e n t	U n l i q u i d a t e d	D i s p u t e d	Amount of Claim without deductiong value of colateral
Account No: 1007 Creditor # : 1 American Express Box 360002 Ft. Lauderdale FL 33336-0002	J	2005 Credit Card				\$ 2,880.00
Account No: 4905 Creditor # : 2 Bank Of Amercia Box 1758 Newark NJ 07101-1758	J	2000 Credit Card				Unknown
Account No: 0693 Creditor # : 3 Bon-Ton (The) PO Box 17264 Baltimore MD 21297-1264	J	2002 Credit Card				\$ 3,790.00
Account No: 5358 Creditor # : 4 Chase PO Box 15153 Willmington DE 19886-5153	J	2005 Credit Card				\$ 3,920.00
<div>5 continuation sheets attached</div> <div> <b>Subtotal \$</b>            (Total of this page)  <b>Total \$</b>            (Report total also on Summary of Schedules)         </div>						10,590.00



In re John N. Thierfeldt and Isabelle N. Thierfeldt / Debtor

Case No. \_\_\_\_\_

(if known)

**SCHEDULE F-CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

Creditor's Name and Mailing Address including Zip Code And Account Number (See instructions above.)	C o d e b t o r	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	C o n t i n g e n t	U n l i q u i d a t e d	D i s p u t e d	Amount of Claim without deductiong value of colateral
Account No: <b>xxxx</b>  Creditor # : 5 Chase Automotive Finance 950 Corbindale Road Houston TX 77024-2800	J	1996 Creditor				Unknown
Account No: <b>9458</b>  Creditor # : 6 Chautauqua ECG Services PO Box 1258 Jamestown NY 14702-1258	J	2005 Medical Bills				\$ 75.00
Account No: <b>0143</b>  Creditor # : 7 Citi PO Box 6500 Sioux Falls SD 57117	J	1997 Credit Card				\$ 4,356.32
Account No: <b>xxxx</b>  Creditor # : 8 Citi PO Box 6241 Sioux Falls SD 57117	J	2000 Credit				\$ 4,431.00
Account No: <b>6326</b>  Creditor # : 9 Citi Platinum Select Box 44167 Jacksonville FL 32231-4167	J	1997 Credit Card				\$ 2,297.30
Account No: <b>xxxx</b>  Creditor # : 10 Citibank PO Box 6003 Hagerstown MD 21747-6003	J	2003 Credit Card				\$ 422.00

Sheet No. 1 of 5 continuation sheets attached to Schedule of  
Creditors Holding Unsecured Nonpriority ClaimsSubtotal \$  
(Total of this page)

11,581.62

Total \$

(Report total also on Summary of Schedules)

In re John N. Thierfeldt and Isabelle N. Thierfeldt / Debtor

Case No. \_\_\_\_\_

(if known)

**SCHEDULE F-CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

Creditor's Name and Mailing Address including Zip Code And Account Number (See instructions above.)	C o d e b t o r	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	C o n t i n g e n t	U n l i q u i d a t e d	D i s p u t e d	Amount of Claim without deductiong value of colateral
Account No: <b>9458</b>  <b>Creditor # : 11</b> <b>David L. Reino, MD</b> <b>PO Box 1258</b> <b>Jamestown NY 14702</b>	<b>J</b>	<b>2005</b> <b>Medical Bills</b>				<b>\$ 70.70</b>
Account No: <b>3884</b>  <b>Creditor # : 12</b> <b>Discover Card</b> <b>P.O. Box 15251</b> <b>Wilmington DE 19886-5251</b>	<b>J</b>	<b>1999</b> <b>Credit Card</b>				<b>\$ 5,904.00</b>
Account No: <b>5438</b>  <b>Creditor # : 13</b> <b>Discover Card</b> <b>P.O. Box 15251</b> <b>Wilmington DE 19886-5251</b>	<b>J</b>	<b>2005</b> <b>Credit Card</b>				<b>\$ 9,588.00</b>
Account No: <b>xxxx</b>  <b>Creditor # : 14</b> <b>Equient Financial Services</b> <b>4343 N Scottsdale Road</b> <b>Scottsdale AZ 85251</b>	<b>J</b>	<b>2001</b> <b>Timeshare</b>				<b>\$ 30,641.00</b>
Account No: <b>xxxx</b>  <b>Creditor # : 15</b> <b>Gap</b> <b>Branch C10T</b> <b>PO Box 29116</b> <b>Shawnee Mission KS 66201-1416</b>	<b>J</b>	<b>2000</b> <b>Credit Card</b>				<b>Unknown</b>
Account No: <b>xxxx</b>  <b>Creditor # : 16</b> <b>HSBC</b> <b>PO Box 15524</b> <b>Wilmington DE 19850</b>	<b>J</b>	<b>2004</b> <b>Credit Line</b>				<b>\$ 1,661.00</b>

Sheet No. 2 of 5 continuation sheets attached to Schedule of  
Creditors Holding Unsecured Nonpriority Claims**Subtotal \$**  
(Total of this page)**47,864.70****Total \$**

(Report total also on Summary of Schedules)

In re John N. Thierfeldt and Isabelle N. Thierfeldt / Debtor

Case No. \_\_\_\_\_

(if known)

**SCHEDULE F-CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

Creditor's Name and Mailing Address including Zip Code And Account Number (See instructions above.)	C o d e b t o r	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	C o n t i n g e n t	U n l i q u i d a t e d	D i s p u t e d	Amount of Claim without deductiong value of colateral
Account No: <b>9885</b>  <b>Creditor # : 17</b> <b>Jamestown Area Medical Assoc.</b> <b>15 South Main Street, Suite 30</b> <b>Jamestown NY 14701</b>	<b>J</b>	<b>2005</b> <b>Medical Bills</b>				<b>\$ 12.13</b>
Account No: <b>9885</b>  <b>Creditor # : 18</b> <b>Jamestown Area Medical Assoc.</b> <b>31 Sherman St.</b> <b>Jamestown NY 14701</b>	<b>J</b>	<b>2005</b> <b>Medical Bills</b>				<b>\$ 40.00</b>
Account No: <b>xxxx</b>  <b>Creditor # : 19</b> <b>JC Penny</b> <b>PO Box 981402</b> <b>El Paso TX 79998-1402</b>	<b>J</b>	<b>2005</b> <b>Credit Card</b>				<b>Unknown</b>
Account No: <b>2399</b>  <b>Creditor # : 20</b> <b>Keybank Mastercard</b> <b>PO Box 183056</b> <b>Columbus OH 43218-3056</b>	<b>J</b>	<b>2005</b> <b>Credit Card</b>				<b>\$ 422.06</b>
Account No: <b>xxxx</b>  <b>Creditor # : 21</b> <b>M&amp;T Bank</b> <b>PO Box 4091</b> <b>Buffalo NY 14240</b>	<b>J</b>	<b>2006</b> <b>Credit</b>				<b>\$ 2,448.00</b>
Account No: <b>5146</b>  <b>Creditor # : 22</b> <b>MBNA America</b> <b>PO Box 15137</b> <b>Wilmington DE 19886-5137</b>	<b>J</b>	<b>1999</b> <b>Credit Card</b>				<b>\$ 5,045.81</b>

Sheet No. 3 of 5 continuation sheets attached to Schedule of  
Creditors Holding Unsecured Nonpriority Claims**Subtotal \$** **7,968.00**

(Total of this page)

**Total \$**

(Report total also on Summary of Schedules)

In re John N. Thierfeldt and Isabelle N. Thierfeldt / Debtor

Case No. \_\_\_\_\_

(if known)

**SCHEDULE F-CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

Creditor's Name and Mailing Address including Zip Code And Account Number (See instructions above.)	C o d e b t o r	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.	C o n t i n g e n t	U n l i q u i d a t e d	D i s p u t e d	Amount of Claim without deductiong value of colateral
Account No: <b>3042</b>  <b>Creditor # : 23</b> <b>Medco Health Solutions, Inc.</b> <b>4865 Dixie Highway</b> <b>Fairfield OH 45014</b>	<b>J</b>	<b>2005</b> <b>Medical Bills</b>				<b>\$ 60.19</b>
Account No: <b>6701</b>  <b>Creditor # : 24</b> <b>RBS Credit Card</b> <b>PO Box 42010</b> <b>Providence RI 02940-2010</b>	<b>J</b>	<b>2000</b> <b>Credit Card</b>				<b>\$ 9,876.00</b>
Account No: <b>0394</b>  <b>Creditor # : 25</b> <b>Target</b> <b>Retailers National Bank</b> <b>PO Box 59317</b> <b>Minneapolis MN 55459-0317</b>	<b>J</b>	<b>2005</b> <b>Credit Card</b>				<b>\$ 2,752.00</b>
Account No: <b>3314</b>  <b>Creditor # : 26</b> <b>Umamaherswara Vejendla, MD</b> <b>152 Foote Ave.</b> <b>Jamestown NY 14701-6940</b>	<b>J</b>	<b>2005</b> <b>Doctor Bills</b>				<b>\$ 12.98</b>
Account No: <b>3378</b>  <b>Creditor # : 27</b> <b>Unitiversity Dental Associates</b> <b>School of Dental Medicine</b> <b>PO Box 8000, Dept. 500</b> <b>Buffalo NY 14267</b>	<b>J</b>	<b>2005</b> <b>Doctor Bills</b>				<b>\$ 85.00</b>
Account No: <b>1027</b>  <b>Creditor # : 28</b> <b>Wachovia</b> <b>PO Box 15137</b> <b>Wilimngton DE 19886-5137</b>	<b>J</b>	<b>1997</b> <b>Credit Card</b>				<b>\$ 2,051.26</b>

Sheet No. 4 of 5 continuation sheets attached to Schedule of  
Creditors Holding Unsecured Nonpriority Claims**Subtotal \$**  
(Total of this page)**14,837.43****Total \$**

(Report total also on Summary of Schedules)

In re John N. Thierfeldt and Isabelle N. Thierfeldt / DebtorCase No. \_\_\_\_\_  
(if known)**SCHEDULE F-CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

Creditor's Name and Mailing Address including Zip Code And Account Number (See instructions above.)	C o d e b t o r	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.		C o n t i n g e n t	U n l i q u i d a t e d	D i s p u t e d	Amount of Claim without deductiong value of colateral
		H--Husband W--Wife J--Joint C--Community					
Account No: <b>4927</b>  <b>Creditor # : 29</b> <b>WCA Hospital</b> <b>PO Box 840</b> <b>Jamestown NY 14702-0840</b>	<b>J</b>	<b>2005</b> <b>Medical Bills</b>					<b>\$ 42.42</b>
Account No: <b>xxxx</b>  <b>Creditor # : 30</b> <b>Wells Fargo Financial</b> <b>1240 Office Plaza Dr.</b> <b>West Des Moines IA 50266-2300</b>	<b>J</b>	<b>1998</b> <b>Credit Card</b>					<b>Unknown</b>
Account No:							
Account No:							
Account No:							
Account No:							

Sheet No. 5 of 5 continuation sheets attached to Schedule of  
Creditors Holding Unsecured Nonpriority Claims**Subtotal \$**  
(Total of this page)**42.42****Total \$****92,884.17**

(Report total also on Summary of Schedules)

In re John N. Thierfeldt and Isabelle N. Thierfeldt / DebtorCase No. \_\_\_\_\_  
(if known)**SCHEDULE G-EXECUTORY CONTRACTS AND UNEXPIRED LEASES**

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State the nature of debtor's interests in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, indicate that by stating "minor child" and do not disclose the child's name. See 11 U.S.C 112 Fed.R.Bankr.P. 1007(m).

☒ Check this box if the debtor has no executory contracts or unexpired leases.

<b>Name and Mailing Address, including Zip Code, of other Parties to Lease or Contract</b>	<b>Description of Contract or Lease and Nature of Debtor's Interest.</b> State whether Lease is for Nonresidential Real Property. State Contract Number of any Government Contract.

In re John N. Thierfeldt and Isabelle N. Thierfeldt / DebtorCase No. \_\_\_\_\_  
(if known)**SCHEDULE H-CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California Idaho, Louisiana, Nevada, New Mexico, Puerto Rico Texas, Washington, or Wisconsin) within the eight year period immediately preceeding the commencement of the case, identify the name of the debtors spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. In community property states, a married debtor not filing a joint case should report the name and address of the nondebtor spouse on this schedule. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C 112 ; Fed.Bankr.P. 1007(m).

☒ Check this box if the debtor has no codebtors.

Name and Address of Codebtor	Name and Address of Creditor

In re John N. Thierfeldt and Isabelle N. Thierfeldt / Debtor Case No. \_\_\_\_\_  
(if known)

## SCHEDULE I-CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by a married debtor in a chapter 7, 11, 12 or 13 case whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child.

Debtor's Marital Status: <b>Married</b>	DEPENDENTS OF DEBTOR AND SPOUSE	
	RELATIONSHIP	AGE
EMPLOYMENT:	DEBTOR	SPOUSE
Occupation	<b>Seasonal Groundskeeper</b>	<b>Sales</b>
Name of Employer	<b>Cable Hollow Golf Course</b>	<b>The Bon Ton</b>
How Long Employed	<b>5 years</b>	<b>5 years</b>
Address of Employer	<b>Cable Hollow Rd. Russell PA 16345</b>	<b>Chautauqua Mall blvd Lakewood NY 14750</b>
Income: (Estimate of average monthly income)	DEBTOR	SPOUSE
Current Monthly gross wages, salary, and commissions (pro rate if not paid monthly)	\$ 0.00	\$ 1,072.28
Estimated Monthly Overtime	\$ 0.00	\$ 0.00
SUBTOTAL	\$ 0.00	\$ 1,072.28
LESS PAYROLL DEDUCTIONS		
a. Payroll Taxes and Social Security	\$ 0.00	\$ 89.46
b. Insurance	\$ 0.00	\$ 78.71
c. Union Dues	\$ 0.00	\$ 0.00
d. Other (Specify): <b>401 k</b>	\$ 0.00	\$ 53.63
SUBTOTAL OF PAYROLL DEDUCTIONS	\$ 0.00	\$ 221.80
TOTAL NET MONTHLY TAKE HOME PAY	\$ 0.00	\$ 850.48
Regular income from operation of business or profession or farm (attach detailed statement)	\$ 0.00	\$ 0.00
Income from Real Property	\$ 0.00	\$ 0.00
Interest and dividends	\$ 0.00	\$ 0.00
Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above.	\$ 0.00	\$ 0.00
Social Security or other government assistance		
Specify: <b>SSI</b>	\$ 1,131.00	\$ 579.00
Pension or retirement income	\$ 399.10	\$ 124.93
Other monthly income		
Specify:	\$ 0.00	\$ 0.00
TOTAL MONTHLY INCOME	\$ 1,530.10	\$ 1,554.41
TOTAL COMBINED MONTHLY INCOME \$ <u>3,084.51</u>		
(Report also on Summary of Schedules)		
Describe any increase or decrease of more than 10% in any of the above categories anticipated to occur within the year following the filing of this document:		



In re John N. Thierfeldt and Isabelle N. Thierfeldt / DebtorCase No. \_\_\_\_\_  
(if known)**SCHEDULE J-CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR**

Complete this schedule by estimating the average monthly expenses of the debtor and the debtor's family. Pro rate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate.

☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

Rent or home mortgage payment (include lot rented for mobile home)	\$	904.42
Are real estate taxes included? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
Is property insurance included? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
Utilities: Electricity and heating fuel	\$	145.00
Water and sewer	\$	0.00
Telephone	\$	50.00
Other <b>Propane</b>	\$	65.00
Other <b>Cable</b>	\$	55.00
Other	\$	0.00
Home maintenance (Repairs and upkeep)	\$	15.00
Food	\$	450.00
Clothing	\$	15.00
Laundry and dry cleaning	\$	10.00
Medical and dental expenses	\$	450.00
Transportation (not including car payments)	\$	150.00
Recreation, clubs and entertainment, newspapers, magazines, etc.	\$	5.00
Charitable contributions	\$	0.00
Insurance (not deducted from wages or included in home mortgage payments)		
Homeowner's or renter's	\$	0.00
Life	\$	0.00
Health	\$	370.00
Auto	\$	118.00
Other <b>Long Term Care</b>	\$	115.00
Other	\$	0.00
Other	\$	0.00
Taxes (not deducted from wages or included in home mortgage)		
Specify:	\$	0.00
Installment payments: (in chapter 12 and 13 cases, do not list payments to be included in the plan)		
Auto	\$	0.00
Other:	\$	0.00
Other:	\$	0.00
Other:	\$	0.00
Alimony, maintenance, and support paid to others	\$	0.00
Payments for support of additional dependents not living at your home	\$	0.00
Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$	0.00
Other: <b>Auto Maintenance</b>	\$	100.00
Other: <b>Misc</b>	\$	100.00
Other:	\$	0.00
<b>TOTAL MONTHLY EXPENSES</b> (Report also on Summary of Schedules)	\$	<b>3,117.42</b>

# UNITED STATES BANKRUPTCY COURT WESTERN DISTRICT OF NEW YORK

In re *John N. Thierfeldt and Isabelle N. Thierfeldt*Case No.  
Chapter 7

\_\_\_\_\_/ Debtor

## SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages on each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts from Schedules D, E and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities."

			AMOUNTS SCHEDULED		
NAME OF SCHEDULE	Attached (Yes/No)	No. of Sheets	ASSETS	LIABILITIES	OTHER
A-Real Property	<b>Yes</b>	<b>1</b>	\$ 126,000.00		
B-Personal Property	<b>Yes</b>	<b>3</b>	\$ 12,650.00		
C-Property Claimed as Exempt	<b>Yes</b>	<b>1</b>			
D-Creditors Holding Secured Claims	<b>Yes</b>	<b>2</b>		\$ 108,305.58	
E-Creditors Holding Unsecured Priority Claims	<b>Yes</b>	<b>1</b>		\$ 0.00	
F-Creditors Holding Unsecured Nonpriority Claims	<b>Yes</b>	<b>6</b>		\$ 92,884.17	
G-Executory Contracts and Unexpired Leases	<b>Yes</b>	<b>1</b>			
H-Codebtors	<b>Yes</b>	<b>1</b>			
I-Current Income of Individual Debtor(s)	<b>Yes</b>	<b>1</b>			\$ 3,084.51
J-Current Expenditures of Individual Debtor(s)	<b>Yes</b>	<b>1</b>			\$ 3,117.42
TOTAL			\$ 138,650.00	\$ 201,189.75	

# UNITED STATES BANKRUPTCY COURT WESTERN DISTRICT OF NEW YORK

In re *John N. Thierfeldt and Isabelle N. Thierfeldt*

Case No.

Chapter 7

\_\_\_\_\_/ Debtor

## STATISTICAL SUMMARY OF CERTAIN LIABILITIES (28 U.S.C. § 159) [Individual Debtors Only]

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$ 0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$ 0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E)	\$ 0.00
Student Loan Obligations (from Schedule F)	\$ 0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$ 0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$ 0.00
<b>TOTAL</b>	\$ 0.00

The forgoing information is for statistical purposes only under 28 U.S.C. § 159.

In re *John N. Thierfeldt and Isabelle N. Thierfeldt* / Debtor Case No. \_\_\_\_\_  
(if known)

## DECLARATION CONCERNING DEBTOR'S SCHEDULES

### DECLARATION UNDER PENALTY OF PERJURY BY AN INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 19 sheets, and that they are true and correct to the best of my knowledge, information and belief.

Date: \_\_\_\_\_

Signature */s/ John N. Thierfeldt*  
*John N. Thierfeldt*

Date: \_\_\_\_\_

Signature */s/ Isabelle N. Thierfeldt*  
*Isabelle N. Thierfeldt*

# UNITED STATES BANKRUPTCY COURT WESTERN DISTRICT OF NEW YORK

In re *John N. Thierfeldt and Isabelle N. Thierfeldt*Case No.  
Chapter 7

\_\_\_\_\_/ Debtor

## CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

- ☒ I have filed a schedule of assets and liabilities which includes consumer debts secured by property of the estate.
- ☒ I have filed a schedule of executory contracts and unexpired leases which includes personal property subject to an unexpired lease.
- ☒ I intend to do the following with respect to the property of the estate which secures those consumer debts:

Description of Property	Creditor's Name	Property will be Surrendered	Property is claimed as exempt	Property will be redeemed pursuant to 11 U.S.C. § 722	Debt will be reaffirmed pursuant to 11 U.S.C. § 524(c)
<i>Ocean Sands Resort, Virginia Timeshare</i>	<i>Ocean Sands Resort</i>	<b>X</b>			
<i>Ocean Key Resort, Virginia Timeshare</i>	<i>Vacation Sales Associates, LP</i>	<b>X</b>			
<i>Kitty Hawk, North Carolina Timeshare</i>	<i>Barrier Island Station</i>		<b>X</b>		<b>X</b>
<i>1088 Wigren Road, Frewsburg NY 14738</i>	<i>National City Bank</i>		<b>X</b>		<b>X</b>
<i>"</i>	<i>Household Finance Realty</i>		<b>X</b>		<b>X</b>

Description of Leased Property	Lessor's Name	Lease will be assumed pursuant to 11 U.S.C.

**Signature of Debtor(s)**

Date: \_\_\_\_\_

Debtor: /s/ John N. Thierfeldt

Date: \_\_\_\_\_

Joint Debtor: /s/ Isabelle N. Thierfeldt

**UNITED STATES BANKRUPTCY COURT  
WESTERN DISTRICT OF NEW YORK**

In re *John N. Thierfeldt*  
*and*  
*Isabelle N. Thierfeldt*

Case No.  
Chapter 7

\_\_\_\_\_/ Debtor  
Attorney for Debtor: *Craig E. Jackson*

**STATEMENT PURSUANT TO RULE 2016(B)**

The undersigned, pursuant to Rule 2016(b), Bankruptcy Rules, states that:

1. The undersigned is the attorney for the debtor(s) in this case.
2. The compensation paid or agreed to be paid by the debtor(s), to the undersigned is:
  - a) For legal services rendered or to be rendered in contemplation of and in connection with this case . . . . . \$ 274.00
  - b) Prior to the filing of this statement, debtor(s) have paid . . . . . \$ 274.00
  - c) The unpaid balance due and payable is . . . . . \$ 0.00
3. \$ 274.00 of the filing fee in this case has been paid.
4. The Services rendered or to be rendered include the following:
  - a) Analysis of the financial situation, and rendering advice and assistance to the debtor(s) in determining whether to file a petition under title 11 of the United States Code.
  - b) Preparation and filing of the petition, schedules, statement of financial affairs and other documents required by the court.
  - c) Representation of the debtor(s) at the meeting of creditors.
5. The source of payments made by the debtor(s) to the undersigned was from earnings, wages and compensation for services performed, and  
*None other*
6. The source of payments to be made by the debtor(s) to the undersigned for the unpaid balance remaining, if any, will be from earnings, wages and compensation for services performed, and  
*None other*
7. The undersigned has received no transfer, assignment or pledge of property from debtor(s) except the following for the value stated:  
*None*
8. The undersigned has not shared or agreed to share with any other entity, other than with members of undersigned's law firm, any compensation paid or to be paid except as follows:  
*None*

Dated: \_\_\_\_\_ Respectfully submitted,

X /s/ Craig E. Jackson  
Attorney for Petitioner: *Craig E. Jackson*  
*Burgett & Robbins*  
*15 E. Fifth Street*  
*P.O. Box 3090*  
*Jamestown NY 14702-3090*

**UNITED STATES BANKRUPTCY COURT  
WESTERN DISTRICT OF NEW YORK**

In re *John N. Thierfeldt*  
*and*  
*Isabelle N. Thierfeldt*

Case No.  
Chapter 7

\_\_\_\_\_/ Debtor

Attorney for Debtor: *Craig E. Jackson*

**COVER SHEET FOR LIST OF CREDITORS**

I hereby certify under penalty of perjury that the attached list of creditors, which consists of 3 pages,  
is true, correct and complete to the best of my knowledge.

Date: \_\_\_\_\_

/s/ John N. Thierfeldt

Debtor

/s/ Isabelle N. Thierfeldt

Joint Debtor

/s/ Craig E. Jackson

*Craig E. Jackson*

*Attorney for the debtor(s)*

*15 E. Fifth Street*

*P.O. Box 3090*

*Jamestown, NY 14702-3090*

Barrier Island Station  
1 Cypress Knee Trail  
Kitty Hawk, NC 27949

Household Finance Realty  
270 East Fairmount Ave.  
Lakewood, NY 14750

National City Bank  
1650 Market Street Ext.  
Warren , PA 16365

Ocean Sands Resort  
580 Lynnhaven Parkway  
ste #201  
Virginia Beach, VA 23452

Vacation Sales Associates, LP  
PO Box 9817  
Virginia Beach, VA 23450

American Express  
Box 360002  
Ft. Lauderdale, Fl 33336-0002

Bank Of Amercia  
Box 1758  
Newark, NJ 07101-1758

Bon-Ton (The)  
PO Box 17264  
Baltimore, MD 21297-1264

Chase  
PO Box 15153  
Willmington, DE 19886-5153

Chase Automotive Finance  
950 Corbindale Road  
Houston , TX 77024-2800

Chautauqua ECG Services  
PO Box 1258  
Jamestown, NY 14702-1258

Citi  
PO Box 6500  
Sioux Falls, SD 57117

Citi  
PO Box 6241  
Sioux Falls, SD 57117

Citi Platinum Select  
Box 44167  
Jacksonville, Fl 32231-4167



Citibank  
PO Box 6003  
Hagerstown , MD 21747-6003

David L. Reino, MD  
PO Box 1258  
Jamestown , NY 14702

Discover Card  
P.O. Box 15251  
Wilmington, DE 19886-5251

Equient Financial Services  
4343 N Scottsdale Road  
Scottsdale, AZ 85251

Gap  
Branch C10T  
PO Box 29116  
Shawnee Mission, KS 66201-1416

HSBC  
PO Box 15524  
Wilmington , DE 19850

Jamestown Area Medical Assoc.  
15 South Main Street, Suite 30  
Jamestown, NY 14701

Jamestown Area Medical Assoc.  
31 Sherman St.  
Jamestown, NY 14701

JC Penny  
PO Box981402  
El Paso, TX 79998-1402

Keybank Mastercard  
PO Box 183056  
Columbus , OH 43218-3056

M&T Bank  
PO Box 4091  
Buffalo, NY 14240

MBNA America  
PO Box 15137  
Wilmington, DE 19886-5137

Medco Health Solutions, Inc.  
4865 Dixie Highway  
Fairfield, OH 45014

RBS Credit Card  
PO Box 42010  
Providence, RI 02940-2010

Target  
Retailers National Bank  
PO Box 59317  
Minneapolis, MN 55459-0317

Umamaherswara Vejendla, MD  
152 Foote Ave.  
Jamestown, NY 14701-6940

Unitiversity Dental Associates  
School of Dental Medicine  
PO Box 8000, Dept. 500  
Buffalo , NY 14267

Wachovia  
PO Box 15137  
Wilimington, DE 19886-5137

WCA Hospital  
PO Box 840  
Jamestown, NY 14702-0840

Wells Fargo Financial  
1240 Office Plaza Dr.  
West Des Moines, IA 50266-2300